



NORTH CAROLINA DATABASES CONTAINING INFORMATION ON VIOLENCE AGAINST WOMEN

February 2003



North Carolina Department of Health and Human Services
Division of Public Health



State of North Carolina
Department of Health and Human Services
Division of Public Health
Injury and Violence Prevention Unit

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Compiled for
The North Carolina Public Health Alliance
to Prevent Violence Against Women

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North Carolina Databases Containing Information on Violence Against Women

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Any errors found in the *Directory*, however, are the sole responsibility of the author.

-- Ingrid Bou-Saada

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Executive Summary

The purpose of this *Directory* is to provide information on available data about violence against women (VAW) in the state of North Carolina for use by program managers and planners, policy-makers, and service providers; agencies preparing grant applications; and anyone else needing data for other purposes. This *Directory* is not an exhaustive list of all VAW-relevant data in the state, but rather it focuses on the databases and data sources that are most accessible and usable. The information was compiled in Fall, 2002.

The Introduction describes the purpose of and method for compiling the *Directory*. Also, several important methodologic issues are discussed so users of these data become aware of some potential pitfalls and/or limitations and can avoid incorrect analyses, interpretations, and applications of the data they access. A brief introduction to the coding scheme for injuries used by the *International Classification of Diseases* will help beginners understand details about available variables relevant to violence against women.

Each *Directory* entry is organized alphabetically by the name of the database or a phrase descriptive of the data if no formal name exists. Each entry includes the following information.

- Agency name, address, and web site
- Description of the agency that houses the database
- Description of the database
- Key VAW-related variables included in the database
- Availability of data
- Whether data are available at the state or aggregate level
- Whether data are available at the county (or regional) level
- Whether the agency publishes annual reports, particularly those including VAW data
- Whether the agency has a web-based query system
- Whether the agency conducts data analyses. If so, what restrictions there are
- Whether the agency distributes data files. If so, what restrictions there are
- Contact name, telephone, and e-mail of the person directly in charge of the database and/or the person to contact for clearance to access the data

After all primary databases and data sources are described, the appendices provide supplemental information on other relevant resources. These include resources that repackage existing data collected and managed by another site; examples of data sources that potentially have local or community level information; resources for statewide and county level descriptive and demographic information; and national data sources that may prove useful for interpreting state and local data. We encourage you to investigate all of the possible avenues in the realm of data and hope that this information will be valuable in your efforts to prevent violence against women.

Introduction

The purpose of this *Directory* is to describe databases available in North Carolina as of fall, 2002, that include information on violence against women (VAW). Specifically, this *Directory* seeks to assist planners and service providers in identifying data that are useful for program planning, applying for funding, evaluating services, and working towards legislative and other policy initiatives.

Although this *Directory* updates and expands information originally presented in the *Catalogue of North Carolina Statewide Injury-Related Databases* published by the Injury and Violence Prevention Unit (IVPU) in May 2000, its scope is much more focused. Whereas the earlier *Catalogue* presented databases covering the broad spectrum of injury, this *Directory* presents only databases with relevant variables on violence against women. Also, this *Directory* does not describe all possible databases containing VAW variables, but rather, it lists only those databases that are most easily accessible and the most useful in terms of the stated objectives. Appendix 1 highlights several data sources that repackage secondary data (i.e., data originally collected by another agency or database) into a user-friendly format, such as a set of data books or statistical fact sheets. Appendix 2 offers examples of data sources that may be found at the local level, and Appendix 3 lists resources for demographic information at the state and/or county level. Finally, Appendix 4 provides several national resources for further VAW data and surveillance.

The necessary activities for compiling the *Directory* occurred over the span of several months in 2002. The idea to develop this resource grew out of a stated need for VAW data expressed at several meetings of the N.C. Alliance to Prevent Violence against Women ("the Alliance"). Many Alliance members noted their frustration in finding relevant data reflecting VAW in North Carolina and at the local level. There are many sources of national VAW data; however, N.C.-specific data are not as easy to find for many service providers, program managers, and policy-makers. Using the *Injury Catalogue* from 2000 as a base, other potential sources of data were identified using the Internet, the knowledge of Alliance members and IPVU staff, and published materials about surveillance by other states or national organizations. A draft Table of Contents was presented at the Alliance meeting on 9/4/02, and members provided feedback on missed data and information sources. Finally, a snowball sampling technique was employed wherein each database manager interviewed for information about their own data was also asked about other potential contacts or sources of VAW data.

For each of the database entries, the following information was collected via a telephone interview.

- Agency name, address, and web site
- Description of the agency that houses the database
- Description of the database
- Key VAW-related variables included in the database
- Availability of data
- Whether data are available at the state or aggregate level
- Whether data are available at the county (or regional) level
- Whether the agency publishes annual reports, particularly those including VAW data

- Whether the agency has a web-based query system
- Whether the agency conducts data analyses. If so, what restrictions there are
- Whether the agency distributes data files. If so, what restrictions there are
- Contact name, telephone, and e-mail of the person directly in-charge of the database and/or the person to contact for clearance to access the data

Table 2, a “Listing of Violence against Women (VAW) Indicators by Database and Data Source” (see page 9), provides a summary of the types of VAW indicators included in this *Directory* with information on the possible databases and data source agencies that may be able to provide relevant data for each indicator.

We want to encourage you to explore all of the information presented in this *Directory* to find data needed for your program or research. Each of the databases is a rich source of information; however, none can be construed as presenting the one, definitive picture of violence against women in North Carolina. Because of this, there are several caveats that must be considered when adapting or analyzing these data. Each database may cover different time periods, perspectives on injury or violence, persons involved, circumstances surrounding the violence, etc. Data are not static, as they change in content and relevancy as time passes. While we hope you can use the data you uncover to their fullest extent, it may prove extremely helpful to revisit the data source each year and update program policies and procedures, as well as educational or other material based on those data. Also, data are not in mutually exclusive categories in each database. Data found in one database may appear in whole or in part in one or more other databases. For example, the death of an individual may be reflected in Hospital Discharge Data, the Medical Examiner’s database, on a death certificate, etc. Different levels of detail and types of information are often captured in different databases, and sometimes, it is difficult or impossible to be certain of each individual’s identity across data sources.

Data included in some databases reflect only the most severe cases of injury. For example, the Trauma Registry only captures information about injuries that were severe enough to require hospital admittance. It does not capture visits to the emergency room, hospital admissions for less than 24 hours, admissions to non-participating (usually smaller) hospitals, or a visit to a local urgent care clinic. Similarly, Hospital Discharge Data cited in this directory only reflect patients who are discharged from a hospital, i.e., their injuries were severe enough to require hospital admission, and their physicians explicitly indicated their injuries were the result of intentional violence. Similar limitations occur in other *Directory* entries. Overall, it is important to keep in mind that many databases do not capture the number of injured women who do not seek out treatment, services, or law enforcement and judicial assistance.

Several *Directory* entries, such as PRAMS, BRFSS, and Uniform Crime Reports, include data collected statewide or collected from a large statewide sample. These data cannot be used to infer or interpret the local situation. Similarly, local data are often comprised of small sample sizes and are usually not sufficiently large enough to be representative of the state. In other words, it is always important to note how the events are counted and to determine what population is described before looking for comparable data. Beginning in 2001, the BRFSS began including data from 10 of the largest counties, and in 2003 this will increase to 15 counties with a population of at least 100,000 and an expressed interest in participating. Comparing these data results from local versus statewide estimates will be interesting and can highlight differences between the two levels of sampling. Both state and local level data are valuable, but it is important to understand the limitations inherent in each.

Strong caution must be used in interpreting or comparing data taken from more than one source. Data are collected for specific purposes, and those purposes shape the nature of the data. Data collectors define the parameters of their variables of interest based on their needs at the time. For example, data collected about “young adults” may encompass different age ranges depending on whether being of “school-age” is an important factor to the data collectors. The category “young adult” may stop at age 18 or it may just begin at age 18. Also, the same or similar terms used to describe violence against women may have vastly different inclusion criteria. For some data collectors “sexual assault” may include everything from unwanted touching or “Peeping Toms” to forced sexual penetration, while others may only include attempted and completed penetration in their data definitions. Differing definitions make it challenging to compare data and to link databases (either for specific individuals or in the aggregate), as the terms are idiosyncratic. In an attempt to resolve some of these obstacles by standardizing data collection, the Centers for Disease Control and Prevention (CDC) published *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*¹; however, these recommendations are relatively new and have not been universally adopted. As we become more familiar with the national and North Carolina data, and as we increasingly use these data, the need to work towards standardization becomes even greater.

Currently, non-fatal injuries are classified using the *ICD-9-CM*, which is the abbreviation of the *International Classification of Diseases, version 9, Clinical Modification*². The *ICD-9-CM* provides nature of injury (i.e., diagnostic) codes and external cause of injury codes (E-codes) for each injury that was treated in a clinical setting. The E-code from *ICD-9-CM* is an alphanumeric 3 or 4 digit number that begins with the letter “E” and describes: (1) whether the injury was intentional (violence-related) or unintentional; (2) the mechanism/cause and the manner/intent of injury; and sometimes (3) the location of occurrence (in which case the code is 5 digits). For example, use of an E-code (in addition to or in place of a diagnostic code) allows for the differentiation of a concussion (the diagnostic code) caused by an unintentional motor vehicle crash from that of concussion resulting from an intentional blow on the head from an assailant. When using the Hospital Discharge Data, the key elements of interest are often a combination of the discharge diagnoses and the E-codes.

Mortality data are classified using a simpler format of the International Classification of Disease (ICD) nomenclature than that adopted for use in clinical settings (ICD-CM). In addition to the difference between the ICD and the ICD-CM rules, death certificates are now coded using the 10th revision of ICD³. In North Carolina, and in most of the U.S., the use of *ICD-10* in death certificates began in 1999. Death certificates still include codes for both nature of injury (i.e., diagnoses) and external cause(s) of injuries. However, the coding schema in *ICD-10* is vastly different from that in *ICD-9*⁴ or *ICD-9-CM*, and great caution should be used in interpreting

¹ Saltzman LE, Fanslow JL, McMahon PM, Shelley GA. *Intimate Partner Violence Surveillance: Uniform definitions and recommended data elements, version 1.0* (Revised 2002). Atlanta (GA): National Center for Injury Prevention and Control, Centers for Disease Control and Prevention; 1999.

² Commission on Professional and Hospital Activities. *The International Classification of Diseases, 9th Revision, Clinical Modification: ICD-9-CM, Annotated, Vol. 1. Diseases Tabular List*. 1990.

³ International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Vol. 1. Geneva: World Health Organization; 1992.

⁴ World Health Organization. *Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death, 9th Revision*. Geneva, Switzerland: World Health Organization; 1977.

trends across versions of ICD codes. For example, although there are codes in *ICD-10* that begin with the letter “E,” they are not external cause of injury codes.

When reviewing mortality data, the first element to note is the field for “underlying cause of death.” If the death was caused by an injury, it will be coded with an external cause of injury code assigned from the *ICD-10*. These external cause of injury codes are alphanumeric 3- or 4-digit numbers preceded by a vowel that describe (1) whether the injury was intentional (violence-related) or unintentional and (2) the mechanism/cause and manner/intent of the injury. In addition to the underlying cause of death, there are many *ICD-10* codes that describe the contributing cause(s) of death. For example, the underlying cause of death may have been homicide by firearm, but the contributing cause of death may have been internal bleeding from the heart. *ICD-10* diagnostic codes generally do not include information on the perpetrator or the location of the injury. However, for most VAW-relevant external cause of injury codes, there is either a 4th digit *place of occurrence code* (e.g., home, residential institution, school/public institution, sports and athletic area, street and highway, trade and service area, industrial and construction area, farm, other specified place, or unspecified place); an *activity code* (e.g., sports activity, leisure activity, working for income, engaged in other types of work, while resting, sleeping, eating or engaging in other vital activities, other specified activity, or unspecified activity), or a *perpetrator code* (e.g., by spouse or partner, parent, acquaintance or friend, other specified person, or unspecified person). This level of specificity, however, is often not provided for external codes of injury on death certificates. In addition, some death certificates will include in other fields the location of the injury, as well as the location of the death.

Table 1 (next page) highlights some of the major codes usually relevant to data on VAW. Other codes may occasionally be relevant, but are not included. One individual may have data coded from both *ICD-9-CM* and *ICD-10* in different databases. For example, if a woman is admitted to the hospital and dies, the hospital data are coded in *ICD-9-CM*, but then the data on the death certificate receive codes from *ICD-10*. Working with external cause of injury codes can be difficult and confusing. Please feel free to contact the IVPU for technical assistance (see contact information below).

We encourage you to take advantage of the expertise held by the listed contact person(s) and others at the data source agencies. There was overwhelming support for this *Directory* by the interviewed database managers, and they will be pleased to answer any questions you may have regarding their data. Data are collected in order to be used, and the listed contacts can help ensure that they are used properly. In addition, the Injury and Violence Prevention Unit also offers its support and guidance as you explore and access data for your work. If you have any questions or if you would like extra copies of this *Directory*, please contact the IVPU at:

Injury and Violence Prevention Unit
Division of Public Health
N.C. Department of Health and Human Services
1915 Mail Service Center
Raleigh NC 27699-1915
(919) 733-3732

Table 1: Relevant *International Classification of Diseases* (ICD) Codes for Data on Violence against Women (VAW) ^{1,2}

Category	Range of VAW External Cause of Injury Codes	Examples of Relevant External Cause of Injury Codes	Relevant VAW Nature of Injury (Diagnostic) Codes
Suicide and self-inflicted injury	<p>ICD-9-CM: E950 – E959</p> <p>ICD-10: X60 – X84</p>	<p>ICD-9-CM: E950 = suicide and self-inflicted poisoning by solid or liquid substance</p> <p>ICD-10: X78 = intentional self-harm by sharp object</p>	<p>ICD-9-CM: 800 – 995 For example: 965.0 = opiates and related narcotics</p> <p>ICD-10: S00 – T98 For example: S61.7 = multiple open wounds of wrist and hand</p>
Homicide and injury purposely inflicted by other persons	ICD-9-CM only: E960 – E969	<p>ICD-9-CM only: E960 = fight, brawl, rape 960.1 = rape E966 = assault by cutting or piercing instrument, incl. homicide (and attempted) E967.3 = abuse to an adult or child by current or former spouse or partner</p>	<p>ICD-9-CM only: 995.80 = adult maltreatment, unspecified 995.81 = adult physical abuse 995.82 = adult emotional/psychological abuse 995.85 = other adult abuse & neglect</p>

Table 1 (cont.): Relevant *International Classification of Diseases* (ICD) Codes for Data on Violence against Women (VAW) ^{1,2}

Category	Range of VAW External Cause of Injury Codes	Examples of Relevant External Cause of Injury Codes	Relevant VAW Nature of Injury (Diagnostic) Codes
Assault, includes homicide	<p>ICD-10 only: X85 – Y09</p> <p><i>NOTE:</i> In “X” and “Y” codes up to Y09 in <i>ICD-10</i>, one can identify place of occurrence if known/relevant (except for Y06 and Y07). The code would then have 4 alphanumeric digits, for example, X60.0</p>	<p>ICD-10: X93 = assault by handgun discharge Y05 = rape (incl. attempted) Y07 = other maltreatment options, including mental cruelty, physical abuse, sexual abuse and torture Y07.0 = (the above) by spouse or partner Y09 = homicide, murder, and manslaughter (incl. attempted)</p>	<p>ICD-10: S00 – T98 For example: S00 – S09 are all related to injury to the head and S10 – S19 are related to injuries to the neck</p>
Injury undetermined whether accidentally or purposely inflicted	<p>ICD-9-CM: E980 – E989</p> <p>ICD-10: Y10 – Y34</p>		

Table 1 (cont.): Relevant *International Classification of Diseases* (ICD) Codes for Data on Violence against Women (VAW)^{1,2}

Category	Range of VAW External Cause of Injury Codes	Examples of Relevant External Cause of Injury Codes	Relevant VAW Nature of Injury (Diagnostic) Codes
Some supplementary classifications of factors influencing health status and contact with health services	ICD-9-CM: V01 – V82 ICD-10: Y90 – Y98	ICD-9-CM: V61.11 = counseling for victim of spouse/partner abuse ICD-10: Y90 = Evidence of alcohol involvement determined by blood alcohol level. Y90.1 = (above plus) blood alcohol level of 20-39 mg/100ml.	

SOURCES:

1. Commission on Professional and Hospital Activities. The International Classification of Diseases, 9th Revision, Clinical Modification: ICD-9-CM, Annotated, Vol. 1. Diseases Tabular List. 1990.
2. International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Vol. 1. Geneva: World Health Organization; 1992.

Table 2: Listing of Violence against Women (VAW) Indicators by Database and Data Source

VAW Indicator	Database	Data Source
Fatalities		
All types of fatalities of women	State Center for Health Statistics and Chief Medical Examiner Database	Based on death certificates and medical examiners' investigations.
	<i>Deaths from Injuries: A Data Book of Injury-Related Mortality Statistics, 1989-1998</i>	(1) Data on the number of deaths are compiled from data originally maintained by the State Center for Health Statistics. (2) Population data are compiled from data originally collected by the State Demographic Office in the Office of State Budget and Management.
	University of North Carolina (UNC) Injury Prevention Research Center	Based on data from the Chief Medical Examiner Database and investigating law enforcement agencies.
Alcohol-related fatalities of women	Chief Medical Examiner Database	Based on toxicology reports.
	UNC Injury Prevention Research Center	Based on data from the Chief Medical Examiner Database and investigating law enforcement agencies.
Murder and "non-negligent manslaughters" of women	Uniform Crime Reports (UCR)	Based on local, county, and state police data reported to the State Bureau of Investigation.
Suicides by women	State Center for Health Statistics and Chief Medical Examiner Database	Based on death certificates and medical examiners' investigations.
	UNC Injury Prevention Research Center	Based on data from the Chief Medical Examiner Database and investigating law enforcement agencies.
Severe Injuries Requiring EMS Transport, Treatment at the Emergency Department (ED), or Admission to the Hospital		
All types of non-fatalities associated with VAW (continued on next page)	Hospital Discharge Data (HDD)	Based on hospital records. The HDD contains information only on those patients admitted to hospitals and, thus, captures more severe injuries. E-coding of HDD records began in 1997, and except for a few categories, is 95% complete.

Table 2 (cont.): Listing of Violence against Women (VAW) Indicators by Database and Data Source

VAW Indicator	Database	Data Source
All types of non-fatalities associated with VAW (continued)	Trauma Registry	Based on multiple sources including EMS, ED, and hospital records. Contains information only on those patients admitted to designated trauma centers and a few other participating hospitals. The Trauma Registry usually captures the most severe injuries. Due to the sampling frame, the database cannot produce statewide estimates of non-fatal injuries.
	North Carolina Emergency Department Database (NCEDD)	The database is still under development and will eventually contain data on all ED visits, extracted from existing hospital and ED information systems.
	PreMIS	Based on ambulance call reports. The database contains information and E-codes only on those patients treated by emergency medical services (EMS) personnel prior to admittance to EDs or hospitals. The previous EMS database captured only a fraction of EMS providers and, thus, could not produce statewide estimates.
Other Injuries		
Physical abuse	Behavioral Risk Factors Surveillance System (BRFSS)	Based on adult self-report from a statewide telephone survey.
	Pregnancy Risk Assessment Monitoring System (PRAMS)	Based on self-reports of women who recently delivered a baby.
Sexual assaults/ rapes (continued on next page)	UCR	Based on local, county, and state police data reported to the SBI.
	BRFSS	Based on adult self-report from a statewide telephone survey.
	Department of Corrections Statistical Report Generator	Based on Department of Corrections reports. Does not include information on the relationship of the perpetrator to the victim.
	Department of Corrections Automated System Query	Based on Department of Corrections reports. Does not include information on the relationship of the perpetrator to the victim.

Table 2 (cont.): Listing of Violence against Women (VAW) Indicators by Database and Data Source

VAW Indicator	Database	Data Source
Sexual assaults/ rapes (continued)	North Carolina Coalition Against Sexual Assault (NCCASA) Statistical Sheets	Compiled information based on data collected annually by the Council for Women and Domestic Violence Commission from local rape crisis centers' reports.
Criminal/ Civil Justice		
Numbers associated with the prison, probation, and parole populations, including <i>broad</i> types of VAW crimes	Department of Corrections Statistical Report Generator	Based on Department of Corrections reports. Does not include information on the relationship of the perpetrator to the victim.
Numbers associated with the prison, probation, and parole populations, including <i>specific</i> types of VAW crimes	Department of Corrections Automated System Query	Based on Department of Corrections reports. Does not include information on the relationship of the perpetrator to the victim.
Domestic Violence Protective Orders (DVPOs)	Department of Corrections Automated System Query	Based on Department of Corrections reports. Does not include information on the relationship of the perpetrator to the victim.
	Governor's Crime Commission (GCC) report	Based on data reported for 2000 by the SBI and the court system, the GCC used a stratified proportionate sample of 25 counties to study how and what custody decisions are made when there is an <i>ex parte</i> (temporary protective order) or DVPO in place.
	Administrative Offices of the Court (AOC) report	Based on data collected by the AOC Court Management and Information Services.
	State Bureau of Investigation report	Based on information each county sheriff is required to enter into the SBI's Division of Criminal Information Domestic Violence Order File.
Batterer intervention referrals	Council for Women and Domestic Violence Commission reports	Reports from local agencies that provide batterer intervention programs.

Table 2 (cont.): Listing of Violence against Women (VAW) Indicators by Database and Data Source

VAW Indicator	Database	Data Source
Services for Victims and Perpetrators of VAW		
Number of women screened for abuse during prenatal care	PRAMS	Based on self-reports of women who recently delivered a baby.
Services to victims of all VAW (including intimate partner violence and sexual assault)	Council for Women and Domestic Violence Commission reports	Based on local domestic violence agencies' and rape crisis centers' annual self-reports.
	Governor's Crime Commission	Based on GCC-funded local domestic violence agencies' and rape crisis centers' annual self-reports.
	North Carolina Coalition Against Domestic Violence (NCCADV)	Based on annual self-reports of local domestic violence agencies that are members of the NCCADV.
Outreach and education/training on VAW	Council for Women and Domestic Violence Commission reports	Based on local domestic violence agencies' and rape crisis centers' annual self-reports.
	Governor's Crime Commission	Based on GCC-funded local domestic violence agencies' and rape crisis centers' annual self-reports.
	North Carolina Coalition Against Domestic Violence (NCCADV)	Based on annual self-reports of local domestic violence agencies that are members of the NCCADV.

DATABASES

Behavioral Risk Factor Surveillance System (BRFSS)

Statistical Services Unit
State Center for Health Statistics
1908 Mail Service Center
Raleigh NC 27699-1908
<http://www.schs.state.nc.us/SCHS>

Agency description

The State Center for Health Statistics (SCHS) is part of the Division of Public Health within the N.C. Department of Health and Human Services. It is responsible for collecting, analyzing, and disseminating health statistics on all North Carolinians. The Statistical Services Unit, located within the SCHS, coordinates, analyses, and disseminates findings on many health-related statewide databases. The Statistical Services Unit is responsible for administering the Behavioral Risk Factor Surveillance System (BRFSS) and responds to user requests for data analysis and interpretation.

Database description

The BRFSS is an annual, random-digit dialed telephone survey for determining statewide estimates of adult health behaviors that was created by the Centers for Disease Control and Prevention (CDC) in 1983, and jointly administered with state health departments. In North Carolina, BRFSS has been administered since 1984, with an average of 3,000 interviews conducted annually with persons over 18 years. Since 2001, the total number of interviews increased, and data are available for the 10 largest North Carolina counties (4,000 interviews) in addition to the statewide data (2,000 interviews). In 2003 in addition to the statewide data, the Statistical Services Unit will begin collecting county level data for 15 counties with a population of at least 100,000 and an expressed interest in participating in the BRFSS. The BRFSS questionnaire contains four modules: (1) Fixed Core (questions asked every year); (2) Rotating Core I (questions asked on odd years starting with 1993); (3) Rotating Core II (questions asked on even years starting in 1994); (4) Optional Modules developed by the CDC that are selected by North Carolina health programs to be added to the BRFSS; and (5) State Modules (a list of CDC approved questions that are generated by and administered in individual states).

State BRFSS data are collected and edited by the SCHS Statistical Services Unit and annually transferred to the CDC for integration into the national BRFSS database. Current and historical N.C.-specific BRFSS data are housed at the SCHS. National BRFSS data are maintained by the CDC and are available at their website.

Key violence against women (VAW) related variables

All of the questions listed below were part of the North Carolina State Module.

Year	VAW variable
1997	2 questions on sexual assault: (1) Has anyone ever forced or tried to force you to engage in unwanted sexual activity?

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Year	VAW variable
	(2) <i>If yes: Do you mean sexual intercourse?</i>
1999	3 questions on sexual assault: (1) Has a stranger ever forced you to have sex or to do sexual things? (2) Has a partner or ex-partner ever forced you to have sex or to do sexual things? By partner, I mean your current or ex (husband/wife) or (boyfriend/girlfriend). (3) Has anyone you knew, not including a partner or ex-partner, ever forced you to have sex or to do sexual things? <i>** For each "yes" above: Has this happened to you in the past 12 months?</i>
2000-2002	3 questions on sexual assault: (1) Has a stranger ever forced you to have sex or to do sexual things? (2) Has a partner or ex-partner ever forced you to have sex or to do sexual things? (3) Has anyone you knew, not including a partner or ex-partner, ever forced you to have sex or to do sexual things? <i>** For each "yes" above: Has this happened to you in the past 12 months?</i> 3 questions on physical violence: (1) Has a stranger ever pushed, hit, slapped, kicked, or physically hurt you in any other way? (2) Has a partner or ex-partner ever pushed, hit, slapped, kicked, or physically hurt you in any other way? By partner, I mean your current or ex (husband/wife) or (boyfriend/girlfriend). (3) Has anyone you knew, not including a partner or ex-partner, ever pushed, hit, slapped, kicked, or physically hurt you in any other way? <i>** For each "yes" above: Has this happened to you in the past 12 months?</i>

Availability of data

Type of data	Availability
Statewide?	Yes
County?	10 randomly chosen counties each year in 2001 and 2002; 15 randomly chosen each year beginning in 2003
Annual written reports?	Not regularly; however, see <i>Health Risks among North Carolina Adults: 1999</i> . The Statistical Services Unit publishes occasional topic-based reports on its website at: http://www.schs.state.nc.us/SCHS/pubs/
Web-based queries?	Yes. (1) North Carolina BRFSS descriptive statistics and questions asked are available for injury, but not for VAW for years 1995, 1997, and 1999. These can be accessed via the

Type of data	Availability
	<p>CDC's web site: http://www.cdc.gov/brfss/. From this page, select "prevalence data" and follow the pull-down menus.</p> <p>(2) The SCHS plans to develop a web-based query system as well. For more information, consult with the contact person listed below.</p> <p>(3) The Statistical Services Unit has a query system for data collected since 2000. See: http://www.schs.state.nc.us/SCHS/healthstats/brfss/</p>
Agency conducts computer runs?	Yes, depending on the volume of the request. Send written request to contact person listed below.
Data files?	<p>Yes.</p> <p>(1) Although the Statistical Services Unit prefers to conduct data runs in house, they will provide datasets to other public health divisions. The Statistical Services Unit requests the opportunity to review off-site analyses to ensure there are no statistical problems. For more information, contact the person listed below.</p> <p>(2) Also, users can download some state-specific data from the CDC website, but not from state modules: http://www.cdc.gov/brfss/</p>

Contact for data

Ziya Gizlice
Survey Operations Manager/ N.C. BRFSS Coordinator
(919) 715-4481
Ziya.Gizlice@ncmail.net

Criminal Justice Data

Office of Research and Planning
Department of Corrections
4221 Mail Service Center
Raleigh NC 27699-4221
<http://www.doc.state.nc.us/rap/>

Agency description

The Office of Research and Planning (ORP) provides criminal justice data for planning, research, and decision support services to staff in the Department of Corrections so they can make informed policy and operational decisions. These services are also provided to the N.C. General Assembly, state officials, and the general public. The Office serves all divisions of the department, often facilitating inter-divisional projects, and assisting in developing legislation, evaluating and revising policies and procedures, and planning or implementing new departmental initiatives. The Department of Corrections oversees prison inmates, parolees, and probationers in the state justice system.

Database description

The ORP maintains two searchable on-line databases, the Statistical Report Generator and the Automated System Query (ASQ). Both of these databases include information about prisoners, parolees, and those on probation at various points in the system such as entry and exit. The ASQ has the capabilities to prepare more sophisticated customized reports than are available from the Statistical Report Generator website.

Key violence against women (VAW) related variables

- The simpler Statistical Report Generator has data available from July 1994 to September 2002 for 9 types of events that include statistics on prison, probation, and parole, each by exits, entries and populations. Data can be generated by age, sex, race and crime category. Although murder, assault, sexual assault and other sexual offense are crime categories, there is no way to determine the relationship between perpetrator and victim.
- The Automated System Query includes a large number of variables that can be manipulated by creating a customized query system. It is not searchable. Demographic data only apply to the offender with no way to identify the possible relationship to the victim. Major crime categories of interest are the same as above; however, ASQ allows a finer categorization.
 - Under “available items” click on “most serious offense”
 - Choices of note include: “rape less than 13”, “rape first degree”, “rape second degree”, “sexual offense first degree”, “sexual offense second degree”, “assault of female”, “profanity, harassment, threatening language on the telephone”, “peeping tom”, “stalking”, “violation of protection order”

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Annual written reports?	Yes, the <i>Annual Statistical Report</i> is available on-line for FY 1997-98 to FY 2000-01. They also publish Research Bulletins and a few papers on specialized topics.
Web-based queries?	Yes
Agency conducts computer runs?	Yes, but on a case-by-case basis depending upon available resources.
Data files?	Yes, they will provide some data files for interagency research, but only with written agreements and IRB approval. All public data are on the website.

Contact for data

Frank Proctor
Applications Analyst Programmer
(919) 716-3086
fproctor@doc.state.nc.us

Emergency Department Data (NCEDD)

Statistical Services Unit
State Center for Health Statistics
1908 Mail Service Center
Raleigh NC 27699-1908
<http://www.schs.state.nc.us/SCHS>

Department of Emergency Medicine
Neurosciences Hospital, CB# 7594
University of North Carolina
Chapel Hill NC 27529
http://www.med.unc.edu/depts_emergencymed.htm

Agency description

The State Center for Health Statistics (SCHS) is part of the Division of Public Health within the N.C. Department of Health and Human Services. It is responsible for collecting, analyzing, and disseminating health statistics on all North Carolinians. The Statistical Services Unit, located within the SCHS, coordinates, analyses, and disseminates findings on many health-related statewide databases. The central database of the N.C. Emergency Department Database is housed at the SCHS.

The Department of Emergency Medicine, part of the University of North Carolina at Chapel Hill, provides patient care and services to the community, region and state. The UNC Hospital system is one of eleven designated Trauma Centers. The Department is also an academic center teaching emergency medicine to students and residents and housing a number of medical and public health related researchers.

Database description

NCEDD, the North Carolina Emergency Department Database, is a centralized statewide repository of emergency department visit data from emergency departments (ED) that is currently under development. The primary aim of NCEDD is to collect ED data with minimal impact on participating hospital resources. The NCEDD staff assists participating hospitals in extracting data from existing hospital and ED information systems. Once the data elements are identified in the hospital's system(s), the extraction file/report is created. The file/report is then extracted on a periodic/automated basis, with limited human intervention necessary. NCEDD collects data from all ED visits, not just trauma visits (the broad definition of trauma visits to the ED make up roughly 25% of total ED visits). NCEDD also aims to collect data from all EDs in the state, not just designated trauma center hospitals, though the short-term goal for 2003 is to include up to 20 of the state's busiest hospitals. The data being collected in NCEDD include a core set of the CDC developed Data Elements for Emergency Department Systems (DEEDS), thus ensuring standardization of variable definition across data sites. The reporting of external cause of Injury codes (E-codes) and any other NCEDD data elements is not mandatory, but is strongly recommended. The website for more information on the database is <http://www.ncedd.org>.

NCEDD grew out of a three-year demonstration grant awarded in 2000 to the SCHS from the Centers for Disease Control and Prevention (CDC) to pilot-test an emergency department surveillance system that would retrieve information from existing databases, rather than asking hospitals to generate new data. SCHS contracted with UNC School of Medicine Department of Emergency Medicine to develop and implement the pilot project.

The further expansion of NCEDD is part of the Division of Public Health's Public Health Preparedness and Response efforts.

The information on NCEDD that is available to the public is aggregate data that describe the demographic characteristics of all patients who were seen in a participating ED; the date and time of arrival; information on chief complaint, diagnoses, treatment, and external cause of injury codes; source of payment; type of transportation to the ED; and disposition at discharge.

Key violence against women (VAW) related variables

- Number, type(s) of diagnosis, the external cause of injury codes that identify the mechanism/cause and the manner/intent of the injury for injuries treated in the ED
- The chief complaint (narrative) is recorded upon arrival. Up to 3 E-codes from ICD-9 will be designated for cause of injury precipitating the visit to the ED. Abuse may not be assigned an E-code
- Disposition (i.e., where the patient went after being discharged)

Availability of data

Type of data	Availability
Statewide?	Yes, but not yet.
County?	Not now, but county level data will be part of the expanded NCEDD.
Annual written reports?	Plan to publish web-based report once system is underway and enough data are warehoused.
Web-based queries?	Plan to establish web-based query system with a log-in only for participating hospitals and public health researchers with Institutional Review Board (IRB) approval and a proposal for data use.
Agency conducts computer runs?	Not yet. Plan to offer (probably not within the year 2003), but only for simple tables/runs with prior IRB approval.
Data files?	Participating hospitals will have access to their own data and the aggregate data. No patient-identifying information will be publicly available.

Contacts for data

NCEDD Centralized Database
For access to data:

Paul Buescher
Branch Head of Statistical Services
State Center for Health Statistics
(919) 715-4478
Paul.Buescher@ncmail.net

NCEDD Project
For questions about NCEDD:

Kate Johnson
NCEDD Project Director
UNC Department of Emergency Medicine
(919) 843-2360
johnk@ils.unc.edu

Emergency Medical Services (EMS) Data: PreMIS

North Carolina Office of Emergency
Medical Services
2707 Mail Service Center
Raleigh NC 27699-2707
<http://www.ncems.org/>

UNC Department of Emergency
Medicine/ PreMIS
10002 Main St.
Chapel Hill NC 27516
<http://www.premis.net/>

Agency description

The North Carolina Office of Emergency Medical Services (OEMS), housed in the Division of Facility Services within the N.C. Department of Health and Human Services, provides technical assistance to and regulatory oversight for over 850 emergency medical services (EMS) providers in N.C. OEMS inspects ambulance vehicles; tests and credentials EMS personnel; establishes standards of practice for EMS personnel; and coordinates several databases including PreMIS (Pre-hospital Medical Information System).

Database description

PreMIS is an Internet based database system that provides information to local EMS services on important information related to their calls, response times, patients' complaints and vital signs, including trauma data, treatment procedures, and disposition data among many other comprehensive items. By keeping track of information handled in one million calls to over 750 EMS providers, PreMIS provides individual local EMS systems a central record that helps them to improve training and make equipment adjustments based on the types of medical emergencies crews encounter. Each local EMS system is able to provide data to the central PreMIS database via one of four ways: by handwritten form; by entering information into a Palm device that is linked to the database; and in the future, using a direct website entry, or using an import schema (not yet functional). For more information, see <http://www.premis.net/>

In 1999, OEMS contracted with the UNC School of Medicine Department of Emergency Medicine, via funding from the N.C. Governor's Highway Safety Program, to create a new EMS surveillance system called PreMIS (Pre-hospital Medical Information System). PreMIS uses state-of-the-art web-based software programs, hand-held Palm devices, paper forms, or imported data from a provider's own database to collect statewide data from local EMS. Although not mandated, PreMIS requests that providers submit injury-related data that are E-coded. An E-code is an alphanumeric 3- or 4-digit number associated with ICD-9-CM nature of injury codes that describes (1) whether the injury was intentional (violence-related) or unintentional; (2) the mechanism of the injury; and sometimes (3) the location of occurrence. PreMIS is working toward linkages with other important databases such as the N.C. Trauma Registry, N.C. Division of Motor Vehicle records, and Hospital Discharge Data.

Data are entered into PreMIS by local EMS providers who retain ownership of the data. PreMIS serves only as a central data storehouse, and local providers may retrieve only their own information, including patient-specific data, from the database. Local EMS will have the ability to conduct anonymous comparisons between systems of similar size and

demographics. Any data used in system comparisons or statewide quality management projects will have patient identifiers removed, and any research conducted using PreMIS data will have in place strict confidentiality policies, protocols, and procedures.

Information collected for PreMIS includes: unit information (i.e., the responding EMS unit, time checkpoints at various stages of the response, delays, etc.); patient demographics; billing; incident scene description; the nature of the situation (including presence of injury, drug/alcohol use, chief and secondary complaint, mechanism of injury, associated symptoms); patient medical history; a narrative run report; and disposition (i.e., destination name, location, and type, etc.). Information particularly relevant to injury includes: patient vital signs; injury/trauma assessment for each part/area of the body (including pelvic/gynecological); duration and severity of chief and secondary complaints; cause and mechanism of injury; procedures and treatments.

Key violence against women (VAW) related variables

- Number, assessment of condition in place of nature of injury/diagnostic codes, and external cause of injury codes for fatal and non-fatal injuries
- Patient outcome disposition (i.e., where patient went after EMS completed work)
- Narrative of chief complaint may be useful
- It is highly unlikely to contain information on the perpetrator of an assault.

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Web-based query?	No
Annual written reports?	Plan to in the future, but target will likely be EMS providers and the state.
Agency conducts data runs?	Protocol not yet established.
Data files?	Only local EMS providers will retain access to their own data.

Contacts for data

Office of Emergency Medical Services
For EMS systems questions:
Sharon Rhyne
Hospitals Specialist
(919) 855-3951
sharon.rhyne@ncmail.net

UNC Department of Emergency Medicine
For data access and PreMIS questions:
Charlotte Weaver
Project Director
(919) 843-0190 or
(866) 773-6477
charlotte_weaver@med.unc.edu

Homicide Research Data

Injury Prevention Research Center
University of North Carolina
Chase Hall, CB#7505
Chapel Hill NC 27599-7505
<http://www.sph.unc.edu/iprc/>

Agency description

The University of North Carolina Injury Prevention Research Center (IPRC) is an interdisciplinary research center working to build the field of injury prevention and control through a combination of interdisciplinary scholarly approaches to research, intervention, and evaluation, as well as through training researchers and medical/public health practitioners. It is one of the founding members of the National Association of Injury Control Research Centers (see <http://www.naicrc.org>).

Database description

Data are available from a special study of homicides and suicides (see entry, page 42) among adult women in North Carolina. Cases of femicide, or homicide of a female, were identified for 586 victims from the Office of the Chief Medical Examiner (OCME) database for the time period of 1/1/91 – 12/31/93. This study used information from the OCME database, as well as abstracted from the hard copy report forms. Additional data were collected by telephone interviews with the investigating law enforcement agencies.

Key violence against women (VAW) related variables

- Method used
- Location
- Time of day
- Murder-suicide event
- Relationship between the victim and perpetrator
- Evidence of alcohol use by the victim
- Evidence of drug and alcohol use by perpetrator
- Other criminal activity at the time of the homicide

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Annual written reports?	Not based on these data; however, IPRC does publish annual reports on all of its activities (see http://www.sph.unc.edu/iprc/new/report.pdf for the 2000-2001 <i>Annual Report</i> and contact person below for previous issues)

Type of data	Availability
Web-based queries?	No
Agency conducts data runs?	Yes
Data files?	No

Contact for data

Carol Runyan
 Director
 (919) 966-2251
Carol_Runyan@unc.edu

Hospital Discharge Data (HDD)

Statistical Services Unit
State Center for Health Statistics
1908 Mail Service Center
Raleigh NC 27699-1908
<http://www.schs.state.nc.us/SCHS>

Agency description

The State Center for Health Statistics (SCHS) is part of the Division of Public Health within the N.C. Department of Health and Human Services. It is responsible for collecting, analyzing, and disseminating health statistics on all North Carolinians. The Statistical Services Unit, located within the SCHS, coordinates, analyses, and disseminates findings on many health-related statewide databases, including analysis of hospital discharge (HDD) data sets.

Database description

According to state law, hospitals are required to collect information (e.g., diagnosis, age and sex of patient, length of hospital stay, and medical costs) on all patients discharged from their hospitals (i.e., HDD). Hospitals (via the N.C. Hospital Association --NCHA) have the authority to select a firm, which has been certified by the N.C. Division of Facility Services, to collect and process these data. NCHA currently contracts with Solucient, a national data processing firm. By state law, Solucient must give copies of annual HDD data files to the Division of Facility services (without patient identifiers) and to the State Health Director, via the State Center for Health Statistics (with patient identifiers). The Statistical Services Unit, within SCHS, houses these HDD data files for the state health director, and performs analyses for DHHS agencies as requested. HDD have been collected routinely in North Carolina since 1987 and the database was originally designed for administrative purposes, particularly for collecting billing information.

In 1997, hospitals began voluntarily assigning on a regular basis an external cause of injury code (E-code) on the HDD abstracts of patients with injury-related conditions. N.C. does not mandate the coding of external cause of injury on the HDD abstract. Currently, for most major categories of injuries, approximately 95 percent of HDD records with a primary diagnosis of injury are E-coded. An E-code is an alphanumeric 3- or 4-digit number associated with ICD-9-CM nature of injury codes that describes (1) whether the injury was intentional (violence-related) or unintentional; (2) the mechanism/cause and manner/intent of the injury; and sometimes (3) the location of occurrence.

Because violence against women *per se* is rarely reported in the HDD, the database is an inadequate source for ascertaining severe injuries requiring hospitalization that result from VAW. For example, between 1999 and 2001, no more than 60 cases of abuse were coded per year. For these reasons, we would not recommend using HDD as a source for identifying the prevalence of VAW. In contrast, the HDD database is a rich data source in which to find data on severe intentional injuries from suicides, attempted suicides, and homicides. HDD does not provide information on the perpetrator for homicides.

Key violence against women (VAW) related variables

- Number, type(s) of diagnosis, the external cause of injury codes that identify the mechanism/cause and the manner/intent of the injury for injuries treated in hospital settings
- Disposition (i.e., where patient went after being discharged)

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Annual written reports?	No
Web-based queries?	Yes, the 2000 HDD may be queried at http://hcup.ahrq.gov/HCUPNet.asp
Agency conducts data runs?	Yes, but access is limited. Analyses may be performed only for agencies within the N.C. DHHS.
Data files?	Data files may be purchased from Solucient.

Contacts for data

For data access:

Dorothee Schmid
Statistical Services Unit
Health Analysis Team
State Center for Health Statistics
(919) 715-4490
Dorothee.Schmid@ncmail.net

To purchase data files:

Cheryl Swanigan
Solucient
(734) 669-7870
cswanigan@Solucient.com

Intimate Partner Violence and Sexual Assault Services

North Carolina Council for Women and Domestic Violence Commission
1320 Mail Service Center
Raleigh NC 27699-1320
<http://www.doa.state.nc.us/doa/cfw/cfw.htm>

Agency description

The mission of the N.C. Council for Women and Domestic Violence Commission is to advise the governor, the North Carolina legislature, and the principal state departments on the special needs of women in North Carolina by identifying and assessing their needs; collecting and distributing information; acting as a resource for the local and region councils/commissions for women; offering services to women in crisis; collaborating with groups and individuals working on behalf of women and working toward expanding equal opportunities in employment and education for women. The N.C. Council for Women and Domestic Violence Commission also administers state and federal funding to local programs across the state addressing abuser treatment, displaced homemakers, domestic violence, rape prevention, and sexual assault.

Database description

The N.C. Council for Women and Domestic Violence Commission collects data from the rape crisis centers and the domestic violence agencies it funds in order to ascertain the number of victims receiving services and the number of outreach/educational programs that are done. The information is often used for grant funding applications. Currently, the agency funds 77 domestic violence programs, 16 satellite county agencies, and 65 rape crisis centers throughout the state. Data are available back to 1991, although the forms have changed several times, most recently in July 2002. Data are collected in a yearly cycle running from July 1 to June 30 and are available at the aggregate level and for individual counties served by the local agencies funded by the N.C. Council for Women and Domestic Violence Commission.

All variables included are relevant to violence against women (see below).

Key violence against women (VAW) related variables

- Related to domestic violence:
 - Number of crisis or support calls received on hotline
 - Total number of unduplicated individuals served
 - Race, sex, age of individuals served
 - Services provided
 - Number of support groups
 - Education and training to any group other than professionals
 - Professional training
 - Volunteer hours
 - Shelter services: number of adults and children sheltered, number of days at maximum capacity

- Related to batterer intervention programs
 - Total number of abusers referred to treatment programs by criminal court, civil court, DSS, mental health professional/agency, substance abuse treatment professional/program, self-referral (non-court), other
 - Total number accepted from each source above
 - Total number participants completing program, and total number participants terminated with reason for termination (attendance/excessive absences, non-compliance/non-participation, arrest or probation violation, recurrence of violence, substance abuse, non-payment of fees, other)
 - Total number of victims and/or partners contacted

- Related to rape prevention and educational programs
 - School presentations: number of presentations and participants in elementary, middle/junior, high school, college/ university, other
 - Community presentations: number of presentations and participants in civic groups, religious groups, law enforcement, legal/judicial, health providers, professional organization, women's organization, other
 - Number of media interviews, PSAs, newsletters, fairs/activities (estimated number of participants)
 - Number of volunteer hours
 - Number of disclosures from presentations/activities
 - List of special events or problems

- Related to Sexual Assault Services
 - Number of crisis or support calls received on hotline
 - Total number of unduplicated individuals served in person
 - Race, sex and age of individuals served
 - Services provided (information, advocacy, referral, transportation, counseling, hospital, court, other)
 - Number of support groups for adults, for children
 - Education/training
 - Volunteer hours worked in agency
 - Type of assault (rape, date rape, adult survivors of child sexual abuse, marital rape, child sex offense, incest, other)
 - Offender relationship (relative, acquaintance, boy/girlfriend, stranger, unknown)

Availability of data

Type of data	Availability
Statewide?	Yes, but only for agencies the Council funds
County?	Yes, again only for agencies the Council funds
Web-based query?	No

Type of data	Availability
Annual written reports?	<p>Yes;</p> <p>(1) They are sent to all funded agencies and to anyone requesting a copy. Call or write the contact person below for a copy.</p> <p>(2) Summary statistics are available for each service category (e.g. domestic violence agencies, rape crisis centers, batterers intervention programs) on-line at: http://www.doa.state.nc.us/doa/cfw/cfwdvcpr.htm and select desired program.</p> <p>(3) Summary statistics are also available on an <i>ad hoc</i> basis in the agency newsletter, which is available on-line at: http://www.doa.state.nc.us/doa/cfw/news.htm.</p>
Agency conducts data runs?	Yes, but limited availability depending on the complexity of the request.
Data files?	No

Contact for data

Joyce Allen
Domestic Violence/Sexual Assault Program Coordinator
(919) 733-2455
Joyce.Allen@ncmail.net

Intimate Partner Violence Services

Governor's Crime Commission
4708 Mail Service Center
Raleigh NC 27609
<http://www.gcc.state.nc.us>

Agency description

The Governor's Crime Commission (GCC) is the chief advisory body to the Governor and the Secretary of the Department of Crime Control and Public Safety for the development and implementation of criminal justice policy. The mission of the GCC is to improve the quality of life for the citizens of North Carolina, enhance public safety, and reduce and prevent crime by improving the criminal justice system. The GCC administers and distributes all federal block grants and other criminal justice funding, including money from the Violence Against Women Act (VAWA) and Victims of Crime Act (VOCA), which are awarded to local rape crisis centers and domestic violence agencies. The Commission consists of 44 members, including the heads of statewide criminal justice and human service agencies, as well as representatives from the courts, law enforcement, local government, the General Assembly, and private citizens.

Database description

As part of administering VAWA and VOCA grants, GCC requires the recipients of funds to collect and report on data regarding the services provided and clients contacted. These data are used for progress reports, accountability, and evaluation of the funded programs, and these progress reports are, in turn, submitted to the federal VAWA and VOCA program offices. Data are also used for policy and decision-making. For example, the GCC is currently using data to determine the need, potential benefit, and justification for establishing statewide domestic violence fatality reviews. One important limitation of these data is that they reflect only the staff whose positions are funded through the GCC and only those clients that reflect the percent effort supported by the GCC. In other words, if a staff position receives only half of its funding through the GCC, then only half of the total effort of that employee is tallied. In contrast, data collected by the Council for Women and Domestic Violence Commission are inclusive of all services, staff, and clients regardless of funding sources (see entry, page 28).

The GCC also collects data from the State Bureau of Investigation, the court system, the North Carolina Coalition against Domestic Violence, the North Carolina Coalition against Sexual Assault, the Council for Women and Domestic Violence Commission, the Department of Corrections Office of Victim Services, and other sources for *ad hoc* research projects. Examples of recent studies include: "Domestic Violence Shelters and Minorities," "Domestic Violence Units: Effective Practices for Law Enforcement," "Domestic Violence: Dispositional Outcomes of Protective Orders in the Courts," and "Effective Strategies for Domestic Violence Shelters: Strengthening Children's Services."

Key violence against women (VAW) related variables

- Number of victims served
- Types of services provided, including direct services, outreach, and education
- Types of abuse addressed (e.g. sexual assault, domestic violence, child maltreatment)
- Research study results, including information on domestic violence shelters and minorities (as clients and staff) and domestic violence protective orders dispositional outcomes

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes. This is not included in the progress report, but it can be calculated.
Web-based query?	No. There is a summary of crime statistics and relevant agencies for each county at: http://www.gcc.state.nc.us/map.htm
Annual written reports?	Yes. Annual reports are sent to federal grantors, and the information is public record. Contact person listed below.
Agency conducts data runs?	Yes, but there are data limits. Probably most useful to researchers rather than program planners.
Data files?	Yes

Contact for data

Doug Yearwood
Director, Criminal Justice Analysis Center and
Lead Information and Technology Planner
(919) 733-4564
Doug.Yearwood@ncmail.net

Intimate Partner Violence Services (cont.)

North Carolina Coalition Against Domestic Violence
115 Market Street, Suite 400
Durham NC 27701
<http://www.nccadv.org>

Agency description

The North Carolina Coalition Against Domestic Violence (NCCADV) is a voluntary collaborative of agencies and individuals who serve battered women and their children. It is committed to building a society in which its shared beliefs and institutions discourage violence against women. NCCADV was founded in 1981 with 21 participating programs, and it now includes over 90 member programs. Areas of support to member programs include technical assistance, training, information about public policy initiatives, and activities to increase public awareness activities.

Database description

The NCCADV compiles annual statistics covering all agency activities for use in grant applications and reports, and aggregate data that are sent back to the member agencies. The statistics are also used for strategic planning, to determine goals, and to evaluate their efforts. Data have been systematically compiled since mid-1999.

Key violence against women (VAW) related variables

- Number of phone calls received per month
- Number of media contacts
- Number of calls from victims
- Number of people receiving professional training and education, as well as community education (e.g., at fairs or conferences)
- Beginning in 2002, the NCCADV compiles a list of domestic violence related homicides statewide and posts details of each on their website.
- Beginning in 2003, the NCCADV will collect number of "hits" to their website.

Availability of data

Type of data	Availability
Statewide?	Yes, but only for number of people trained or received community education.
County?	No
Web-based query?	No

Type of data	Availability
Annual written reports?	Yes. For a copy, call or write the contact person below. The most recent <i>Annual Report</i> is posted on the website, http://www.nccadv.org
Agency conducts data runs?	These data do not lend themselves to complex statistical manipulation.
Data files?	Agency will provide overall tallies, but will not release raw data or collection sheets they use.

Contact for data

Mary-Beth Loucks-Sorrell
 Technical Assistance Coordinator
 (919) 956-9124
marybeth@nccadv.org

Medical Examiner Data

Office of the Chief Medical Examiner
1005 Brinkhouse-Bullitt Building
CB# 7580
University of North Carolina at Chapel Hill
Chapel Hill NC 27599-7590
<http://www.pathology.med.unc.edu/ocme>

Agency description

The Office of the Chief Medical Examiner (OCME), part of the Division of Public Health within the N.C. Department of Health and Human Services, is mandated to investigate all deaths that are unattended, suspicious, or the result of violence (e.g., homicide, suicide, and accidents). OCME maintains the Medical Examiner data files.

Database description

According to state law, appointed county medical examiners must investigate all unattended, suspicious, or violent deaths and submit reports to the OCME. Medical examiner reports include: interview notes with law enforcement officers, relatives, or other individuals who may have knowledge of the circumstances surrounding the death; observation notes of place of death; autopsy and toxicology reports; and death certificates. All deaths receive an external cause of injury code (formerly called E-codes in ICD-9-CM), which are alphanumeric 3- or 4-digit numbers preceded by a vowel that describe (1) whether the injury was intentional (violence-related) or unintentional and (2) the mechanism/cause of the injury. Computer data files exist from 1972 to present. There is no E-code specifically for partner violence, and there is no information collected electronically about partners. Information about partners may be found on paper forms in the medical examiner record, though documentation varies by case. It may also be possible to link medical examiner data to a police record or death certificate to more conclusively categorize a death that results from partner violence. OCME data are public record.

Key violence against women (VAW) related variables

- Number, type(s) of diagnosis, the external cause of injury codes that identify the mechanism/cause and the manner/intent of the injury, and the weapon used for all types of injury fatalities, including homicide and suicide
- Number, type(s) of diagnosis, the external cause of injury codes that identify the mechanism/cause and the manner/intent of the injury, and the weapon used for all alcohol-related fatalities, including homicide and suicide

Availability of data

Type of data	Availability
Statewide totals?	Yes
County totals?	Yes
Annual written reports?	Yes. <i>Office of the Chief Medical Examiner Annual Report</i> is available on web site for 1992-1995. Some printed editions available from earlier years.
Web-based queries?	No. Neither OCME nor Division of Public Health post query systems on their web sites.
Agency conducts computer runs?	Yes. Send written requests to contact person listed below.
Data files?	Yes. Send written requests to contact person listed below.

Contact for data

Pat Barnes
Administrator
(919) 966-2253
pbarnes@ocme.unc.edu

Mortality Statistics

Statistical Services Unit
State Center for Health Statistics
1908 Mail Service Center
Raleigh NC 27699-1908
<http://www.schs.state.nc.us/SCHS>

Agency description

The State Center for Health Statistics (SCHS) is part of the Division of Public Health within the N.C. Department of Health and Human Services. It is responsible for collecting, analyzing, and disseminating health statistics on all North Carolinians. The Statistical Services Unit, located within the SCHS, coordinates, analyses, and disseminates findings on many health-related statewide databases. The Vital Records Unit, also part of the Division of Public Health, records, codes for statistical research purposes, and electronically maintains all certificates of birth, death, marriage, and divorce.

Database description

The Vital Records Unit, within the Division of Public Health of the N.C. Department of Health and Human Services, receives, processes, and files all North Carolina death certificates on a continuing basis. Vital Records' nosologists determine the underlying cause of death for each decedent and assign ICD-10 nature of injury and external cause of injury codes to the underlying and all contributory cause(s) of death recorded on the death certificate. The external cause of injury codes (formerly called E-codes in ICD-9-CM) are alphanumeric 3 or 4 digit numbers preceded by a vowel that describe (1) whether the injury was intentional (violence-related) or unintentional and (2) the mechanism of the injury. The Statistical Services Unit then performs annual analyses of these mortality files and responds to public requests for data.

Key violence against women (VAW) related variables

- Number, type(s) of diagnosis, the external cause of injury codes that identify the mechanism/cause and the manner/intent of the injury for both underlying cause of death and contributing cause of death fields
- Location of injury (usually given) and location of death (always given)

Availability of data

Type of data	Availability
Statewide estimates?	Yes
County estimates?	Yes
Annual written reports?	Yes. Since 1997, the SCHS publishes the annual <i>North Carolina Vital Statistics, Volume 2: Leading Causes of Death</i> . Special reports on firearm deaths and suicides were published. Also, <i>Detailed Mortality Statistics</i> were published for 1995-96 and 2000 data.

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Type of data	Availability
Web-based queries?	<p>Yes. Web-based queries can be accessed in two ways.</p> <ol style="list-style-type: none"> 1. Detailed Mortality Statistics for injury deaths caused by homicides and suicides by county and by state (and for some ICD-10 codes, by age, race, and sex) for years 1996-2001 can be accessed on the SCHS website: http://www.schs.state.nc.us/SCHS/healthstats/index.html 2. N.C. state injury mortality statistics, including homicide and suicide, for years 1981-1999 can be accessed by year, age, race and sex via the CDC's WISQARS (Web-based Injury Statistics Query and Reporting System) website http://www.cdc.gov/ncipc/wisqars/
Agency conducts computer runs?	Yes, see below.
Data files?	<p>Yes. Data files can be accessed in two ways.</p> <ol style="list-style-type: none"> 1. Public use mortality files (i.e., no personal identifiers) from 1968-2001 can be downloaded from the UNC Howard Odum Institute for Research in Social Science (IRSS) web site: http://www.irss.unc.edu/ncvital/. For questions about these databases, contact Chris Wiesen at (919) 843-5110 or Chris_Wiesen@unc.edu 2. Mortality statistics (as well as general population, census, and many others) by year, county and state can also be downloaded from the N.C. Office of State Planning State Data Center's (SDS) Log Into to North Carolina (LINC). For more information about LINC, see: http://www.ospl.state.nc.us/sdn/.

Contacts for data

To access data:

Paul Buescher
Branch Head of Statistical Services
State Center for Health Statistics
(919) 715-4478
Paul.Buescher@ncmail.net

To request a data run:

Kathleen Jones-Vessey
Statistical Services Supervisor
Statistical Services Unit
(919) 715-9692
Kathleen.Jones-Vessey@ncmail.net

Pregnancy Risk Assessment Monitoring System (PRAMS)

Statistical Services Unit
State Center for Health Statistics
1908 Mail Service Center
Raleigh NC 27699-1908
<http://www.schs.state.nc.us/SCHS>

Agency description

The State Center for Health Statistics (SCHS), housed in the Division of Public Health within the N.C. Department of Health and Human Services, is responsible for collecting, analyzing, and disseminating vital statistics on all North Carolinians. The Statistical Services Unit within SCHS coordinates, analyses, and disseminates findings on many statewide databases, including the Pregnancy Risk Assessment Monitoring System (PRAMS).

Database description

Developed by the Centers for Disease Control and Prevention (CDC), the purpose of PRAMS is to describe high-risk pregnancy risk factors, access to health care services, and other maternal and child health issues with a goal of improving the health of mothers and babies. CDC awarded SCHS a five-year grant to implement PRAMS from 1997 through 2002 (18 other states were awarded five-year grants as well). In April 2001 North Carolina was awarded funding to continue PRAMS for five more years (currently 32 states and New York City also collect PRAMS information). Each month in North Carolina approximately 200 women who have recently given birth are selected at random from the birth certificate file to participate in the study. The birth certificate file is stratified by birth weight (e.g., babies with weights categorized as “normal,” “moderately low,” and “very low” were used until 2001; beginning in 2002, the categories became “normal” and “low” with an oversampling of low birth weight). Mothers with moderately and very low birth weight babies are over-sampled. Selected mothers are mailed a detailed questionnaire; follow-up telephone calls are then made to those not responding to the mail survey. Data collection began with July 1997 births.

Key violence against women (VAW) related variables

- Number of women experiencing violence before, during and after pregnancy
- Change in frequency of violence before and during pregnancy
- Number of women screened for intimate partner violence during prenatal visits

NOTE: Although “violence during pregnancy” questions have been asked in every PRAMS survey (1997-2002), the questions were asked in a slightly different manner beginning in 2000. These modifications should not substantially alter the comparability of these questions. (See PRAMS 2000-2002 Questions on next page).

1997-1999 Questions
During prenatal care visits, did a doctor, nurse, other health care worker talk with you about physical abuse to women by their husbands or partners? (yes, no)
In the past 12 months before you got pregnant, did any of these people physically abuse* you? (husband/partner, family or household member, friend, someone else)
During your most recent pregnancy, did any of these people physically abuse* you? (husband/partner, family or household member, friend, someone else)
During your most recent pregnancy, would you say that you were physically abused* more often, less often, or about the same compared with the 12 months before you got pregnant?

* physical abused defined as pushing, hitting, slapping, kicking, or any other way of physically hurting someone.

2000-2002 Questions
During any of your prenatal care visits, did a doctor, nurse, or other health care worker talk with you about... physical abuse to women by their husbands or partners? (yes, no)
a) During the 12 months before you got pregnant, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way? (yes, no)
b) During the 12 months before you got pregnant, did anyone else physically hurt you in any way? (yes, no)
a) During your most recent pregnancy, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way? (yes, no)
b) During your most recent pregnancy, did anyone else physically hurt you in any way? (yes, no)
How often in the past year have the following things happened to you?
a) My partner insulted or swore at me. (0-11 or more)
b) My partner destroyed something belonging to me. (0-11 or more)
c) My partner used threats to make me have sex when I didn't want to. (0-11 or more)
d) My partner threatened to hit or throw something at me. (0-11 or more)
a) Since your delivery, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way? (yes, no)
b) Since your delivery, did anyone else push, hit, slap, kick, choke, or physically hurt you in any other way? (yes, no)

Note: The entire survey in pdf format can be downloaded from:
<http://www.schs.state.nc.us/SCHS/healthstats/prams/survey.html>

Availability of data

Type of data	Availability
Statewide?	Yes
County?	No, cannot break out data by county, but for very large counties, can do estimates.
Annual written reports?	No
Web-based queries?	Yes. Data from 1997-2000 are available. Go to: http://www.schs.state.nc.us/SCHS/about/programs/prams/

Type of data	Availability
Agency conducts computer runs?	Yes. Written requests for data runs that cannot be accomplished from the website should be directed to contact person listed below.
Data files?	Not usually. Data files have confidential information. Some university faculty may gain access to data stripped of identifiers by signing a data user agreement. Written requests for data file must be directed to contact person listed below.

Contact for data

Ziya Gizlice
Survey Operations Manager
(919) 715-4481
Ziya.Gizlice@ncmail.net

Suicide Research Data

Injury Prevention Research Center
University of North Carolina
Chase Hall, CB#7505
Chapel Hill NC 27599-7505
<http://www.sph.unc.edu/iprc/>

Agency description

The University of North Carolina Injury Prevention Research Center (IPRC) is an interdisciplinary research center working to build the field of injury prevention and control through a combination of interdisciplinary scholarly approaches to research, intervention, and evaluation, as well as through training researchers and medical/public health practitioners. It is one of the founding members of the National Association of Injury Control Research Centers (see <http://www.naicrc.org>).

Database description

Data are available from a special study of homicides and suicides (see entry, page 24) among adult women in North Carolina. Cases of suicide by a female were identified for 882 victims whose deaths occurred between 1/1/89 and 12/31/93 from the Office of the Chief Medical Examiner (OCME) database. This study used information from the OCME database as well as data abstracted from the hard copy report forms. Additional data were collected by telephone interviews with the investigating law enforcement agencies for those cases that occurred in 1993.

Key violence against women (VAW) related variables

- Method used
- Time of day
- Murder-suicide event
- Suicide in a motor vehicle
- Owner of the weapon used
- Suicide note left
- Many precursor variables

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Annual written reports?	Not based on these data; however, IPRC does publish annual reports on all of its activities (see http://www.sph.unc.edu/iprc/new/report.pdf for the 2000-2001 <i>Annual Report</i> and contact person below for previous issues).
Web-based queries?	No

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Type of data	Availability
Agency conducts data runs?	Yes
Data files?	No

Contact for data

Carol Runyan
 Director
 (919) 966-2251
Carol_Runyan@unc.edu

Trauma Registry

North Carolina Office of Emergency Medical Services
Division of Facility Services
2707 Mail Service Center
Raleigh NC 27699-2707
<http://www.ncems.org/>

Agency description

The North Carolina Office of Emergency Medical Services (OEMS), part of the Division of Facility Services within the N.C. Department of Health and Human Services, provides technical assistance to and regulatory oversight for over 850 emergency medical services (EMS) providers in N.C. The OEMS inspects ambulance vehicles; tests and credentials EMS personnel; establishes standards of practice for EMS personnel; oversees the state trauma system, including the N.C. Trauma Registry; and is currently developing a statewide database of EMS transports from ambulance call reports (see PreMIS entry, page 22).

Database description

According to state rules, designated trauma centers are required to collect and submit data on patient injuries to the N.C. Trauma Registry. (Currently there are eleven designated trauma centers in N.C.: Carolinas Medical Center, Cleveland Regional Medical Center, Duke University Medical Center, Mission St. Joseph's Hospital, Moses H. Cone Memorial Hospital, New Hanover Regional Medical Center, NorthEast Medical Center, University Health Systems of Eastern Carolina, University of North Carolina Hospitals, Wake Forest University Baptist Medical Center, and WakeMed.) Occasionally, non-trauma hospitals voluntarily submit data to the Trauma Registry as well. Patients included in the Registry are those who have an ICD-9-CM injury diagnosis code within 800-959.9 and who are either (1) admitted to the hospital for 24 hours or more from an emergency department (ED); (2) die in the ED; (3) are dead on arrival; (4) are transferred from the ED to the operating room or intensive care unit; or (5) who are transferred to another hospital.

At each participating hospital, a registrar reviews and extracts data from ambulance call reports, emergency department and hospital medical records, and then forwards these records, without personal identifiers, to the Central Data Collection Agency. The OEMS has contracted with the Department of Surgery in the UNC School of Medicine to serve as the Central Data Collection Agency.

The original Trauma Registry began in 1987 and ended in 1993. In 1994, the database was completely revised; the Registry began using a new national software program, called NTRACS™, which was developed and supported by the American College of Surgeons. Due to significant changes in data points and definitions, the original 1987-1993 data are incomparable with the new database started in 1994.

Key violence against women (VAW) related variables

- Number, type(s) of diagnosis, the external cause of injury codes that identify the mechanism/cause and the manner/intent of the injury, for those patients seen at trauma and participating non-trauma hospitals. Drownings, poisonings, or suffocation may be excluded.
- If an external cause of injury code(s) (E-code) has been assigned, it will identify whether the injury was intentional or unintentional. If intentional, it discriminates between self-inflicted injuries and injuries inflicted by another person.
- The “Chief Complaint” is a categorical variable, which includes “assault” or “rape.” No information on the perpetrator is listed.
- Disposition (i.e., where patient went after being discharged)

Availability of data

Type of data	Availability
Statewide?	Yes, but limited to trauma centers and participating non-trauma centers.
County?	No; beginning in 2003, new software will require entering each patient's county of residence.
Written annual reports?	Yes, the annual <i>Standard Report, North Carolina Trauma Registry</i> is available from the N.C. OEMS website (http://www.ncems.org/trauma/trauma_registry.htm) or either contact person listed below.
Web-based queries?	No. Neither the N.C. Division of Facility Services nor the UNC Department of Surgery posts a query system on-line.
Agency conducts computer runs?	Yes. Investigator must complete a “Routine Data Request” form and submit it to UNC Central Data Collection Agency. Contact Sharon Schiro (see below).
Data files?	Yes, but limited. If simple factual data are needed, submit a “Routine Data Request” form. If the data requested are extensive, the investigator must complete a “Scientific Project Application for Data” and submit it to the OEMS. The Research Review Committee then reviews the requests. Contact OEMS person listed below. Detailed instructions are available at: http://www.ncems.org/research_process_forms.htm

Contacts for data

Office of Emergency Medical Services

UNC Central Data Collection Agency

For access to the data:

Sharon Rhyne
Hospitals Specialist
(919) 855-3951
sharon.rhyne@ncmail.net

For questions about the data:

Sharon Schiro
Director of Research &
Communications
(919) 966-6263
Sharon_Schiro@med.unc.edu

Uniform Crime Reporting (UCR) Data

Division of Criminal Information
North Carolina State Bureau of Investigation (SBI)
3320 Garner Road
Raleigh NC 27626-0500
<http://sbi2.jus.state.nc.us/>

Agency description

The Division of Criminal Information (DCI) is part of the State Bureau of Investigation (SBI) within the N.C. Department of Justice. It collects, stores, and disseminates criminal history and criminal statistical information for local, state, and national crime-related agencies. DCI coordinates the N.C. Uniform Crime Reporting (N.C. UCR) program. The stated purpose of the SBI is to identify and apprehend criminals, scientifically analyze evidence, and investigate and prepare evidence for use in criminal court. The SBI also provides investigative assistance to city and county law enforcement, when requested.

Database description

The N.C. UCR program is part of a nationwide, cooperative crime surveillance system administered by the U.S. Federal Bureau of Investigation. Since 1973, local law enforcement agencies have voluntarily submitted crime report data to DCI (currently about 500 agencies participate). To ensure accurate and consistent reports, DCI trains and provides technical assistance to local law enforcement officers in how to complete crime data reports. Computerized files of UCR data are mostly available since 1976.

Key violence against women (VAW) related variables

- Numbers of annual murders and rapes since 1993, plus the ten-year trend. Statewide data including factors such as age, sex, race, weapon used, circumstance, and relationship of perpetrator to victim are presented in various cross-tabulations. Some county level data are also available.
- Numbers of domestic violence orders (*ex parte*/ temporary and protective) issued by county from 4/1/96 through 3/4/01 are available with information on the number of total, active, dismissed, and expired orders.

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Annual published reports?	Yes. Publishes <i>Annual Summary Report</i> and <i>Crime in North Carolina</i> annually. Both documents are available on-line (see http://sbi2.jus.state.nc.us/crp/public/Default.htm) and at local and university library collections.

Type of data	Availability
	Domestic violence protective order data available at http://sbi2.jus.state.nc.us/crp/public/other/DVOrders.htm
Web-based queries?	No. Neither the Division of Criminal Information nor the U.S. FBI post query systems on their web sites.
Agency conducts computer runs?	Yes. Send inquiries to contact person below.
Data files?	<p>Yes. Data files can be obtained in one of three ways.</p> <p>(1) After approving a written request, DCI will send a text file for requested variables and years. See contact person listed below.</p> <p>(2) Selected statewide variables for 1993-2001 can also be downloaded (e.g., excel spreadsheet) from the SBI web site at http://sbi2.jus.state.nc.us/crp/public/Default.htm</p> <p>(3) Selected statewide and county variables (e.g., violent crime index) can be downloaded from the N.C. Office of State Planning State Data Center's (SDC) Log Into North Carolina (LINC) system. For more information about LINC, go to http://www.ospl.state.nc.us/sdn/.</p>

Contact for data

Tim Parker
Information Specialist
(919) 662-4500
stats@mail.jus.state.nc.us

APPENDICES

Appendix 1: Sources of Secondary Data

Civil Court Domestic Violence Protective Orders

North Carolina Administrative Offices of the Court
PO Box 2448
Raleigh NC 27602
<http://www.nccourts.org/>

Agency description

In the N.C. Administrative Offices of the Court, the office of Research and Planning provides the Judicial Branch with statistical information, analysis, research, evaluation, planning, grant administration and budget development. It is the principal source for court statistics and information, including statistics on criminal charges and convictions. In addition to these activities and projects, other major activities within Research and Planning include legislative matters affecting the courts, helping to ensure access to the courts for people with disabilities, and assisting counties with the provision of adequate court facilities.

Database description

In response to a request, the Research and Planning staff prepared a tally of all civil court cases with a domestic violence issue by county and outcome of the hearing for the fiscal year 2000/2001. These data were compiled from the AOC Court Management and Information Services office. There are no current plans to continue this report on an annual basis.

Key violence against women (VAW) related variables

- Statewide and county level tallies of the number of domestic violence protection orders that were granted in whole or in part, denied, involuntarily dismissed, voluntarily dismissed or reached settlement, and other disposition. These outcomes are further distinguished between cases that do and do not have a temporary or *ex parte* order at the court hearing.

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Annual written reports?	Not based on these data; however, the N.C. Judicial Branch publishes an annual report. The annual reports for 2000 and 2001 are available on-line at: http://www.nccourts.org/Citizens/Publications/AnnualReports.asp Also available at this URL is the report <i>2000-01 NC Courts Statistical and Operations Summary</i>
Web-based queries?	There is no query system; however the data are posted at: http://www.nccourts.org/Citizens/SRPlanning/Statistics.asp

Type of data	Availability
Agency conducts computer runs?	Yes, depending on the nature of the request.
Data files?	No

Contact for data

Patrick Tamer
 Statistical Programmer
 (919) 733-1557
Patrick.Tamer@nccourts.org

Sexual Assault

North Carolina Coalition Against Sexual Assault (NCCASA)
4426 Louisburg Road, Suite 100
Raleigh NC 27616
<http://www.nccasa.org>

Agency description

The North Carolina Coalition against Sexual Assault (NCCASA) is an inclusive statewide alliance working to end sexual violence through education, advocacy, and legislation. Since 1986 NCCASA has provided information, referrals, and resources about sexual violence to individuals, rape crisis centers, and other organizations. The Coalition also acts in a supportive role to statewide rape crisis centers and provides training, promotes public awareness, assists colleges and university campuses, and educates legislators in an effort to prevent sexual violence in North Carolina.

Database description

Since 2000, the NCCASA has produced brief Sexual Assault Statistics Sheets on various topics by compiling existing data collected by the N.C. Council for Women and Domestic Violence Commission (see entry, page 28). Two important purposes for these sheets are (1) providing data for writing grant applications and (2) presenting data to legislators to provide a state-wide view of sexual assault to complement their knowledge of their home county statistics.

Key violence against women (VAW) related variables

The available Statistical Sheet titles include:

- Acquaintance Sexual Assault
- Adolescent Sexual Assault
- Campus Sexual Assault
- Child Sexual Assault
- Drug Facilitated Sexual Assault
- The Internet and Sexual Assault
- Rape Trauma Syndrome
- Reporting Sexual Assault
- Sexual Assault
- Sexual Assault and Diversity
- Sexual Assault in the Workplace
- Sexual Harassment
- Stalking and Sexual Assault

These Statistics Sheets are updated annually, which allows for identification of trends over time.

Availability of data

Type of data	Availability
Statewide?	Yes
County?	No
Annual written reports?	Yes, but the Statistics Sheets focus much more on presenting data than the Coalition's biannual report.
Web-based queries?	No
Agency conducts computer runs?	Yes, depending on the request and data availability, the Coalition is able to compile descriptive statistics on topics not already covered. Preference is made to filling requests made by Coalition members.
Data files?	Requests should be made to the Council for Women and Domestic Violence Commission, the administrative home for the data.

Contacts for data

For data requests:

At NCCASA:
Veronica Butcher
Education Coordinator
(919) 431-0995; Ext. 20
veronica@nccasa.org

For all other requests:

Monika Johnson Hostler
Executive Director, NCCASA
(919) 431-0995; Ext. 17
monika@nccasa.org

At the Council for Women & Domestic
Violence Commission:
Joyce Allen
Domestic Violence/Sexual Assault
Program Coordinator
(919) 733-2455
Joyce.Allen@ncmail.net

VAW-Related Injury Mortality

Injury and Violence Prevention Unit
Division of Public Health
N.C. Department of Health and Human Services
1915 mail Service Center
Raleigh NC 27699-1915
<http://www.communityhealth.dhhs.state.nc.us/hlthprom/injury.htm>

Agency description

The Injury and Violence Prevention Unit (IVPU) uses surveillance systems to identify and track the causes of injuries throughout the state in order to build successful prevention programs. The IVPU plans, implements, and evaluates prevention strategies that are built on surveillance data and incorporates proven prevention methods. Because many agencies and organizations are involved in injury prevention, the IVPU collaborates with others to enhance the effectiveness of all prevention activities. Injury prevention strategies focus on environmental design, product design, human behavior, education, and legislative and regulatory requirements that support environmental and behavioral change. The IVPU works to prevent both unintentional and intentional (violence-related) injuries.

Database description

The Injury and Violence Prevention Unit compiled data originally analyzed by the State Center for Health Statistics (see entry, page 37) and demographic data originally collected by the State Demographic Office in the Office of State Budget and Management. These data were assimilated and published in the four-volume set *Deaths from Injuries: A Data Book of Injury-Related Mortality Statistics 1989-1998* for each of the 100 counties and the entire state of North Carolina. Much of the original data is publicly available from the University of North Carolina Odum Institute for Research in Social Science (UNC IRSS). These books present crude and age-adjusted rates of all injury-related deaths by external cause of injury and the intent of the injury. The data are presented by sex and race.

Key violence against women (VAW) related variables

- Number, type(s) of diagnosis, the external cause of injury codes that identify the mechanism/cause and the manner/intent of the injury for all fatal injuries

Availability of data

Type of data	Availability
Statewide?	Yes
County?	Yes
Annual written reports?	No, however, <i>Ad hoc</i> reports on various topics are published.
Web-based queries?	No
Agency conducts computer runs?	Yes, but only for some requests. Depending on the data requirements, the request may be referred to the UNC IRSS

Type of data	Availability
	at (919) 962-3061.
Data files?	Yes, on a limited basis (for example, county specific mortality data either raw or from the data book.)

Contact

Catherine (Kay) Sanford
Epidemiologist
(919) 715-6440
Kay.Sanford@ncmail.net

Appendix 2: Examples of Local Data Sources

The following list of potential data sources is not intended to be exhaustive, and local areas will vary in amount, access to, or even presence of many of the sources. This list provides a starting point for pursuing data relevant to violence against women in the local community. If you choose to use local data, it is imperative that you investigate how the data were collected and by whom, as well as the population included. Please refer to the Introduction for more detailed descriptions and caveats for using local data.

Law enforcement

- Civil and criminal court records
- Magistrates
- Police departments in municipalities
- Sheriffs' departments
- Campus police
- Domestic violence related calls to 911
- District attorneys' offices

Medical and health related data

- Local emergency departments
- Local health departments, including Baby Love/Maternal Care Coordination Program
- University and college student health clinics
- Emergency medical services
- Mental health centers
- Substance use treatment centers

Service providers for victims of violence against women

- Local domestic violence agencies
- Local rape crisis centers
- Community or outreach centers, for example, services for Latinos

Other

- Existing reports by local agencies, such as a prepared Community Diagnosis
- College and university student project reports

Appendix 3: Sources for State and County Demographic Information

The following resources provide information on the demographics of the state and/or each county. In addition, some of the sites provide useful contextual information, such as the Governor's Crime Commission website. This information is intended to help interpret the context in which other data exist. Please revisit the Introduction for important caveats regarding the use and comparison of data sources.

The Governor's Task Force for Healthy Carolinians 2010 Objectives

The 2010 Healthy Carolinians 2010 Objectives target health outcomes for North Carolina and recommendations for achieving those outcomes by the year 2010. The website <http://www.healthycarolinians.org> provides the entire Task Force report; data about the current (as of 2000) incidence and prevalence of each health outcome in the state or developmental objectives about collecting baseline data if they do not already exist; and recommendations for achieving each target health outcome by 2010. The website also provides definitions of all health outcomes presented. The data are at the state level, but information is provided for locating county level data from the State Center for Health Statistics and the website does provide profiles for some counties (the link is "county profiles" found on the left-hand side of the webpage).

The relevant information about the objectives for sexual assault and intimate partner violence, as well as related population disparities, can be found at <http://www.healthycarolinians.org/2010objs/sexassault.htm>.

Information on the objectives for other forms of violence, including homicide, assault, suicide, and firearms, can be found at <http://www.healthycarolinians.org/2010objs/violhomicide.htm>.

Supporting data on sexual assault and other forms of violence, including homicide, assault, suicide, and firearms, can be found at <http://www.healthycarolinians.org/2010objs/datapage7.htm>.

University of North Carolina Institute of Government (IOG)

The IOG website provides a comprehensive listing of all North Carolina counties with links to websites for each county's local or regional government, Chamber of Commerce, civic organizations, educational resources, visitor's bureau, tourism and relocation services, and commercial services. Counties vary widely in how many of these potential resources are on-line and included in this list. For more information, visit <http://ncinfo.ioq.unc.edu/library/counties.html>.

The IOG also provides links to the home pages of many towns and cities across the state with a corresponding link to the appropriate county. Please see the description above for the type of information that may be included for each town or city. For more information, go to <http://ncinfo.ioq.unc.edu/library/cities.html>.

Log Into North Carolina (LINC)

LINC is a project of the North Carolina State Data Center (SDC), which is a consortium of state and local agencies established in cooperation with the U.S. Bureau of the Census to provide the public with data about North Carolina and its component geographic areas.

The LINC website offers a large array of statistics and demographic information for the following broad topics: population and housing; vital statistics and health; social and human services; law enforcement, courts, and corrections; environment, recreation, and resources; energy and utilities; government; employment and income; business and industry; agriculture; and transportation. The site provides data derived from census information and offers customized report capabilities from the posted data. For more information, see <http://linc.state.nc.us/>.

The North Carolina State Demographic Unit provides population estimates and projections of counties and cities for the purposes of long-range planning and the distribution of state shared revenues to local governments. Data are presented for each county or municipality by age, race and gender. For more information visit <http://demog.state.nc.us/>.

For comparisons to national census data, visit **CensusScope** at <http://www.censusscope.org/>.

Governor's Crime Commission

The Governor's Crime Commission (GCC) offers an interactive map on its website. After clicking on a county of interest, you will see current information on population size, the name of domestic violence shelter(s), and whether the county has an operational SAVAN (Statewide Automated Victim Assistance & Notification) program. SAVAN provides 24-hour access to information on the status of an offender, and victims can register to be notified anytime the offender's status in the justice system changes. Each county page also has important legal system information such as the name of the sheriff, district attorney, and district manager; the number of deputies; the name and location of corresponding correctional and juvenile facilities; the probation district numeric designation and the number of probation officers. Finally, each county has information on its index crime rate, prison admittance, and parole population. This information can be accessed on the GCC homepage (<http://www.gcc.state.nc.us>) by clicking on "NC County Information" at the right side of the screen.

Appendix 4: National Resources for Violence against Women (VAW) Data and Surveillance

Many national governmental agencies, professional associations, and advocacy groups provide data on violence against women. Some of these agencies, such as the Centers for Disease Control and Prevention (CDC), also serve as a resource for statewide data. Please review the caveats found in the Introduction before using national data sources in conjunction with state or local data. Table 3 (below) provides a summary of many national websites offering data on violence against women.

Table 3: National Websites that Contain Data on Violence against Women (VAW)¹

Source	Website(s)	Sponsor(s) ²
Supplementary Homicide Reports (SHR)*	www.fbi.gov/ucr/ucr.htm www.ojp.usdoj.gov/bjs/homicide/addinfo.htm	FBI
National Crime Victimization Survey*	www.ojp.usdoj.gov/bjs/	BJS
National Incident-Based Reporting System*	www.fbi.gov/ucr/ucr.htm	FBI
National Ambulatory Medical Care Survey	www.cdc.gov/nchs/about/major/ahcd/namcsdes.htm	CDC (NCHS)
National Hospital Ambulatory Medical Care Survey	www.cdc.gov/nchs/about/major/ahcd/nhamcsds.htm	CDC (NCHS)
National Hospital Discharge Survey	www.cdc.gov/nchs/about/major/hdasd/nhds.htm	CDC (NCHS)
National Health Interview Survey	www.cdc.gov/nchs/nhis.htm	CDC (NCHS)
National Survey of Family Growth	www.cdc.gov/nchs/nsfg.htm	CDC (NCHS)
National Vital Statistics System	www.cdc.gov/nchs/about/major/dvs/mortdata.htm	CDC (NCHS)
National Electronic Injury Surveillance System	cpsc.gov/cpscpub/pubs/3002.html	CPSC
Monitoring the Future	165.112.78.61/DESPR/MTF.html	SAMHSA, University of Michigan
Youth Risk Behavior Surveillance System	www.cdc.gov/nccdphp/dash/yrbs/ov.htm	CDC (NCCDPHP)
Behavioral Risk Factor Surveillance System	www.cdc.gov/brfss/	CDC (NCCDPHP)
National Violence Against Women Survey(1995–1996)*	ncjrs.org/pdffiles1/nij/181867.pdf ncjrs.org/pdffiles/172837.pdf ncjrs.org/pdffiles/169592.pdf	NIJ, CDC (NCIPC)

Table 3 (cont.): National Websites that Contain Data on Violence against Women (VAW)¹

Source	Website(s)	Sponsor(s) ²
National Family Violence Survey (1975, 1985)*	www.icpsr.umich.edu/cgi/ab.prl?file=9211 www.icpsr.umich.edu/cgi/ab.prl?file=7733 socio.com/srch/summary/afda/fam31.htm socio.com/srch/summary/afda/fam32.htm	NIH (NIMH)
National Youth Survey(1976–1989)*	www.sscnet.ucla.edu/issr/da/index/techinfo/m2491.htm	NIH (NIMH, NIDA), OJJDP, NIJ
National Survey of Family and Households (1987–1988 and 1992–1994)*	156.40.88.3/about/cpr/dbs/res_national4.htm socio.com/srch/summary/afda/fam01-05.htm	NIH (NICHHD)
National Women's Study(1989)*	www.musc.edu/CVC/NIDApubs.htm	NIH (NIDA)

*Includes specific data or direct questions regarding violence against women.

NOTES:

1. Adapted from Table 1 in Centers for Disease Control and Prevention, *Building Data Systems and Responding to Violence against Women: Recommendations from a Workshop*. MMWR 2000;49(No. RR-11):1-28). The source report is available online in its entirety at <http://www.cdc.gov/mmwr/PDF/rr/rr4911.pdf>.
2. FBI=Federal Bureau of Investigation; BJS=Bureau of Justice Statistics; NCHS=National Center for Health Statistics; CPSC=Consumer Product Safety Commission; SAMHSA=Substance Abuse and Mental Health Services Administration; NCCDPHP=National Center for Chronic Disease Prevention and Health Promotion; NIJ=National Institute of Justice; NCIPC=National Center for Injury Prevention and Control; NIH=National Institutes of Health; NIMH=National Institute of Mental Health; NIDA=National Institute of Drug Abuse; OJJDP=Office of Juvenile Justice and Delinquency Prevention; NICHHD=National Institute of Child Health and Human Development.

Many VAW-related reports and statistics can also be found at the website of the **National Criminal Justice Reference Service (NCJRS)** at <http://virlib.ncjrs.org/Statistics.asp>. For example:

Rennison, CJ. *Intimate Partner Violence and Age of Victim 1993-1999*. Bureau of Justice Statistics Special Report, October 2001, NCJ 187635. Washington, DC: U.S. Department of Justice Office of Justice Programs. (Available on-line at <http://www.ojp.usdoj.gov/bjs/pub/pdf/ipva99.pdf>). This report provides data on and discussion of intimate partner violence of both males and females.

The NCJRS also provides a listing of links to many other statistics-related websites at <http://www.ncjrs.org/statwww.html>.

A report listing the current state of data collection (as of 1996) on domestic and sexual violence and providing recommendations for improving surveillance can be found at <http://www.ncjrs.org/pdffiles/alldom.pdf>.

Justice Research and Statistics Association. *Domestic and Sexual Violence Data Collection: A Report to Congress Under the Violence Against Women Act*. National Institute of Justice Research Report 1996, NCJ 161405. Washington, DC: U.S. Department of Justice Office of Justice Programs.

This report was updated and the data collection systems in many states were explored in greater depth. Three states, Iowa, Connecticut, and Illinois, were then examined as case studies. This report was published in 1999 and can be viewed at http://www.jrsa.org/pubs/reports/dom_full_report.html.

The **Centers for Disease Control and Prevention** (CDC) provides a web-based data query system for data by states at <http://www.cdc.gov/ncipc/wisqars/default.htm>. This system, known as WISQARS (Web-based Injury Statistics Query and Reporting System), can provide customized reports on fatal and non-fatal injuries of all types.

The **CDC** also provides many useful resources that pertain to VAW.

For the Recommendations and Reports series see <http://www.cdc.gov/mmwr/recreppy.html>. An example is the report from which the table of national data sources was copied. (Centers for Disease Control and Prevention. Building Data Systems for Monitoring and Responding to Violence against Women: Recommendations from a Workshop. *MMWR* 2000;49(No. RR-11):1-28)

For Surveillance Summaries, see http://www.cdc.gov/mmwr/mmwr_ss.html. One example report is Surveillance for Homicide Among Intimate Partners – United States, 1981-1998. *MMWR: CDC Surveillance Summaries*, October 12, 2001: 50(SS-3).

For information on specific health issues as reported by state and territorial health departments, see the *Morbidity and Mortality Weekly Reports* series at http://www.cdc.gov/mmwr/mmwr_wk.html.

The **CDC** also houses the National Center for Injury Prevention and Control, which provides much information and data on many topics related to VAW. See <http://www.cdc.gov/ncipc/ncipchm.htm>.

